## **FORM 500**

Department of Taxation P.O. Box 1500 Richmond, VA 23218-1500

## 2004 Virginia Corporation Income Tax Return



ISC	AL year filer or SHOR	<b>T</b> year filer: ENTER beginn	ning date,	and ending date	,	and CHECK H	IERE 🔲	
Ch	eck if —	Name			Offic	al Use Only		
-	Change in Address							
_	Consolidated Return	Number And Street						
□с	Combined Return							
	Multistate Schedule	Address continued			FEIN	1		
JE	Final Return (No longer liable for tax)	Oits On Town Otata And 71D Oads			\ /:i	-:- O A		
٦F	Nonprofit	City Or Town, State And ZIP Code			Virgi	nia Corporation Acc	count Number	
_''	Corporation	Date Incorporated	State Or Country					
∃G	Schedule 500 AB	State of Southly				Check Box If Filing Computer Generated		
	Attached	Principal Business Activity Code	Description of Business Activity		I .	mputer Genera ms.	aled $\Box$	
_oca	ion of the Corporation's books	S	Contact for Corporation's boo	ks	Cont	act Telephone Num	ber	
1	Federal taxable incom	ne (from attached federal r	eturn)		1		00	
2	(a) Fixed Date Confor	mity Addition (depreciation	n- see instructions)		2(a)		00	
			instructions)		2(b)		00	
	(c) Exception amount	from Schedule 500AB, Lir	ne 8 (see Part III, # 38)	2(c)		00		
	(d) Taxable addition fr	om Schedule 500AB, Line	10 (see Part III, # 38)		<b>2(</b> d)		00	
	` '	,			` '		00	
3	Total [add lines 1 and	2 (a), (b), (d) & (e)]			3		00	
4	(a) Fixed Date Confor	mity Subtraction (deprecia	tion-see instructions)		4(a)		00	
	(b) Fixed Date Confor	mity Subtractions (other-s	see instructions)		4(b)		00	
	(c) Subtractions (from	ı line 37)			4(c)		00	
5	Total [subtract lines 4	(a), (b) & (c) from line $3$ ] .			5		00	
6	Savings and loan ass	ociation's bad debt deduct	ion (see instructions)		6		00	
7	Virginia taxable incom	ne (subtract line 6 from line	9 5)		7		00	
		ducted in VA, skip to line 9		Salandala 500A and associate	. linna 0/a	\		
۰	Multistate Corporati		ultistate Corporation), attach S	schedule 500A and complete	ines 8(a	) through 8(a)		
0	•		e 500A, line 16)	8(a)		00		
	•	,	ine 2, 3, 4, 5 or 10	` '		%		
			ie			00		
	.,			` ,		00		
a	.,			` ,	9	00   0	00	
	-	, ,-	om Form 500CR, line 100				00	
			ne 9)				00	
			tax payments			00	00	
-	, ,	•		` ,		00		
			and other payments			00		
	, , ,	•	orm 500CR, line 108	` '		00		
	` '		nd (d)]	` ,	12		00	
13							00	
14	,	,					00	
							00	
	•	,					00	
17			m 500V with payment or if pai	_	_		00	
				• • • • • • • • • • • • • • • • • • • •			00	
18	Overpayment til line	iz is larger man ille i i. er	itel overpayment,		18		1 00	
		•					00	
19	Amount to be credited	d to 2005 estimated tax			19			

PA	RT I — Additions to Federal Taxable Income (attach schedules)				
22	Net income taxes and other taxes which are based on, measured by or computed with reference to net income	. 22		00	
23	Interest on state obligations other than Virginia			00	
	Savings and loan association's federal bad debt deduction			00	
	Unrelated business taxable income as defined by Section 512 of the IRC (to the extent excluded from Line 1, Page 1)			00	
26	The amount of ESOP Credit carryover deducted under Section 404(i) of the IRC			00	
	Other			00	
	Total - Enter this amount on line 2(e)			00	•
ΡΔ	RT II — Subtractions from Federal Taxable Income (attach schedules)				
	Income from obligations or securities of the United States exempt from state income taxes but not from federal income taxes	. 29		00	
30	Foreign dividend gross-up (Section 78 IRC)	. 30		00	
	Refund or credit of income taxes included in federal taxable income			00	
	Subpart F income (Section 951 IRC)			00	
	The amount of salaries and wages not deducted due to the federal work opportunity tax credit			00	
	Foreign source income as defined by Virginia Code Section 58.1-402 C.8.	. 00			
J-	(see instructions for limitations)	. 34		00	
35	Dividends received from corporations in which the recipient owns fifty percent or more of the voting stock and to the extent remaining in federal taxable income	. 35		00	
36	Other	. 36		00	
37	Total - Enter this amount on line 4(c)	. 37		00	•
	Check the corresponding box if the corporation is:  (a) A farmers' purchasing cooperative	39(b)			
	(b) Federal NOL	40(b)		00	•
	(c) Net Va. Modifications for year of NOL	40(c)		00	•
	(d) Percent of federal NOL used this year	40(d)		%	•
	If there are NOL's for more than one year, attach a schedule.				
41	Has your federal income tax liability been redetermined for any prior year(s) which has not previously been reported to the Virginia Department of Taxation? If YES, check here	. 41	•		
	If YES, also provide years				
	Report changes under separate cover to the Virginia Department of Taxation at the address on the	ne fron	t of this return.		
mor Dep I, the for v been purs	I this return to the Virginia Department of Taxation, P. O. Box 1500, Richmond, Virginia 23218-1500 on or be the thin (15th day of the sixth month for nonprofit corporations) following the close of the taxable year. Male artment of Taxation.  The undersigned president, vice-president, treasurer, assistant treasurer, chief accounting officer, or other officer duly which this return is made, declare under the penalties provided by law that this return (including any accompany nexamined by me and is, to the best of my knowledge and belief, a true, correct, and complete return, made in go used to the income tax laws of the Commonwealth of Virginia. If prepared by a person other than taxpayer, their definich they have any knowledge.	e che autho ing sc ood fait	cks payable to the chedules and staten h, for the taxable ye	e Virginia corporation nents) has ear stated,	
	(Date) (Signature of officer)		(Title)		
	(Date) (Individual or firm, signature of preparer, and phone number)		(Address)		

\_\_ Approved Vendor Code \_\_\_\_\_